Ada West
DERMATOLOGY
Diseases of the Skin, Hair, Nails, and Skin Cancer Treatment

Mohs Surgery **Ryan Thorpe, M.D.**
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MOHS SURGERY WOUND CARE INSTRUCTIONS FOR SKIN GRAFTS

You have two areas with bandages: your surgical wound that has been repaired with a skin graft and the donor site (where your skin graft was taken from).

GENERAL INSTRUCTIONS:

- Take it easy! Do not do anything that raises your blood pressure or heart rate for at least 48 hours. No exercising, heavy lifting, bending over, stretching, or straining.
- Do not drink alcohol for 48 hours.
- Do not be surprised if you see a small amount of blood-tinged drainage. If your dressing becomes saturated with bright, red blood, remove the dressing. Then use clean gauze to apply gentle, but firm direct pressure to the wound for 10 minutes (no peeking). If the bleeding has not stopped, apply pressure for another 10 minutes. **If the bleeding has not stopped after 20 minutes, or if there is a large, swollen, purple area around the surgery site, call our office at (208) 884-3376 or the Emergency Contact Information below.** If the bleeding stops, please call us to discuss further instructions.
- Bruising and swelling around the surgical site is normal. If your surgery was near the eye, forehead, nose, or cheeks you may experience a black eye. Your eye may even swell shut. Do not be frightened if this happens. The swelling will go down once you are up and around.
- If your surgical site is on the head, sleep with your head elevated about 30 degrees (a couple of pillows) for the first couple nights to decrease swelling.
- Take Extra Strength Tylenol® and ibuprofen for pain
- After the day of surgery, you may apply an ice bag to the surgical site to reduce swelling. Apply every few hours while you are awake as needed. Apply the ice bag about 20 minutes at a time **over the top of your dressing.** A bag of frozen vegetables (peas or corn) works very well. Do not apply ice directly to the skin.

Ice the area

- If prescribed an antibiotic please take as directed and complete the full course.

CARE FOR YOUR SKIN GRAFT:

- LEAVE THE DRESSING ON AND KEEP IT CLEAN AND DRY FOR _____.
- After 24 hours you may shower, but do not get the dressing wet. If this bandage becomes loose or uncomfortable, please call to discuss with the nurse. We can arrange to change your dressing, if needed.
- If the dressing falls off, do not try to clean the skin graft. Gently apply a generous amount of Vaseline® or Aquaphor® to the graft with a Q-tip®. Then apply a non-stick dressing (Telfa®) that is large enough to cover the graft, and tape it down snuggly. (You may need to gently clean the skin around the graft with mild soap and water and then gently pat dry so that the tape will stick). Call our office for additional instructions.
- Do **not** let another health care professional change the graft dressing or clean the graft area unless this has been approved with Dr. Thorpe or a member of our staff.
- The sutures used on the graft and donor site are absorbable and will dissolve over the next 7-14 days. Sometimes non-dissolvable sutures are used as well.
- Once instructed, please change dressing once daily:
  →Use finger pressure to clean surrounding skin with plain water and mild soap such as Dove® liquid or Cetaphil® cleanser. Then apply Vaseline® or Aquaphor® ointment and cover with a non-stick bandage and paper tape. You will want to protect the graft with a thin bandage for about 2 weeks to one month, please use your best judgment.
- For the next 12 months be very diligent about using sunscreen to protect the graft from the sun.

CARE FOR YOUR DONOR SITE:

The skin graft was taken from a donor site.

- Always wash your hands prior to changing the dressing.
- After 2 days you may carefully remove the dressing and can get the wound wet in the shower. Do NOT soak your wound and do NOT allow direct water pressure to hit the wound.
- After 2 days begin daily bandage changes. Use plain water and mild soap such as CeraVe or Cetaphil® cleanser to gently wash the area. You should use a cotton tip applicator (Q-tip®) or clean gauze to clean the wound. Gently remove any dried blood or excess crust by rolling the cotton tip applicator or gauze over the wound and then rinsing. **Do not use cotton balls.**
- After cleaning, apply a thin coat of Vaseline® or Aquaphor®. Then apply a new thin bandage (Band-Aid® or non-stick gauze and paper tape).
- If a scab forms allow it to fall off on its own. Keep dressing the wound daily for a minimum of 7 days and keep it moist with Vaseline® or Aquaphor®. Do NOT pick the scab off.

If donor site was closed with stitches:

- The stitches will be removed in 7-10 days, unless they are dissolvable, keep dressing the wound until that time.

If donor site is left to heal by second intention (Mother Nature):

- Keep dressing the wound until it heals (usually 3-6 weeks).

Scan the QR code for a wound care instruction video:

Pain Control

PAIN MANAGEMENT REGIMEN:

1. Acetaminophen 500mg; 1-2 tabs by mouth every 4-6 hours. Do NOT take more than 6 pills in a 24-hour period.
-Continue to take every 4-6 hours until you feel little to no pain at the end of a dosing interval.

2. Alternating regimen with Acetaminophen (500 mg) and Ibuprofen (600 mg)

Within 1 hour of surgery: Acetaminophen 500 mg
3-4 hours later: Ibuprofen 600 mg
3-4 hours later: Acetaminophen 500 mg
3-4 hours later: Ibuprofen 600 mg
-Continue to alternate until you feel little to no pain at the end of a dosing interval.
Only take these if you have been told that they are okay for you, as some patients may not take them due to preexisting medical conditions (eg. Patients on Warfarin cannot take ibuprofen).

WHAT TO EXPECT:

- The skin graft may look purple or black when the bandage is first removed. The top layer of skin may peel away from the graft and/or surrounding skin. This is normal and the discoloration will improve over the next several months.
- The healing rate varies by individual, depending on age, skin type, and location of the graft. Sometimes the color and texture match will be very good within a few weeks, but in most cases there will be redness and slight contour abnormalities for several months. If the cosmetic results of the repair are not satisfactory after about 6 months, there are usually simple procedures that can be performed to improve the appearance.

FOLLOW-UP CARE:

Return to your general dermatologist for all other skin problems, including a skin exam in 6 months and every 6 months after, for the next 2 years.

CALL THE DOCTOR IF YOU NOTICE:

- Bright red bleeding from your wound that does not stop after applying gentle, direct pressure for 20 minutes.
- A large, swollen, tender, purple area around either surgery site (hematoma).
- Redness or swelling that lasts more than 4 days.
- Tenderness, warmth, or red streaks around the wound.
- Increased bloody drainage, green or yellow drainage, or a foul smelling drainage from your wound.
- A fever greater than 101 degrees F that continues after 3 days.
- **If you have any questions or concerns, please the Mohs office at (208) 813-3250.**
- **For after-hours emergency, call Dr. Thorpe's cell phone (801) 400-5691.** If you are unable to reach Dr. Thorpe please go to your local hospital emergency department.

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